

9
TOWNSEND and TOWNSEND CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, CA 94111-3834
(415) 576-0200

RULE 60

Atty. Doc. No. 000287-004830

"Express Mail" Label No. EM197110021US

Date of Deposit September 9, 1996

08 709965 #3/1
6-16-97
M.L.



ASSISTANT COMMISSIONER FOR PATENTS
BOX PATENT APPLICATION
Washington, D.C. 20231

I hereby certify that this is being deposited with the United States
Postal Service "Express Mail Post Office to Addressee" service under
37 CFR 1.10 on the date indicated above and is addressed to:
Assistant Commissioner for Patents, Washington, D.C. 20231

Sir:

This is a request under 37 CFR 1.60 for filing a

☒ Continuation ☐ Division

of application No. 07/823,932, filed 01/21/92,

of (list each inventor) Philip S. Green

for Endoscopic Surgical Instrument And Method For Use

By Kate Hawigane

The application papers **FILED HERewith** (specification, claims, originally filed drawing(s) and oath or declaration) are a true copy of the prior application.

☒ Please amend the specification by inserting before the first line the sentence:

--This is a ☒ Continuation ☐ Division

of application No. 07/823,932 filed January 21, 1992

now abandoned

☒ A preliminary amendment is enclosed.

☐ Formal drawings are enclosed.

☐ An Information Disclosure Statement under 37 CFR 1.97 is enclosed.

☒ A verified statement to establish status under 37 CFR 1.9 and 37 CFR 1.27 ☐ is enclosed, or ☒ was filed in the above identified parent application.

☐ Enclosed is a petition to extend time to respond.

☐ Please record the enclosed assignment to _____

☒ The prior application is assigned to SRI International

☒ Please cancel claim(s) 1-25

Claims as Filed, Less any Cancelled Claims

(Col. 1)

(Col. 2)

SMALL ENTITY

OTHER THAN A
SMALL ENTITY

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	21	-20 = *1
INDEP CLAIMS	3	-3 = *0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED		

RATE	FEE
	\$375
x11 =	\$11
x39 =	\$
+125 =	\$
TOTAL	\$386

OR
OR
OR
OR
OR
OR

RATE	FEE
	\$750
x22 =	\$
x78 =	\$
+250 =	\$
TOTAL	\$

* If the difference in Col. 1 is less than zero, enter "0" in Col. 2

Please charge Deposit Account No. 20-1430 as follows:

☒ Filing fee

\$ 386.00

☒ Any additional fees associated with this paper or during the pendency of this application

☐ The issue fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b).

☐ A check for \$ _____ is enclosed.

1 extra copy of this sheet is enclosed.

Respectfully submitted,

TOWNSEND and TOWNSEND and CREW LLP

John T. Raffle
Reg. No. 38,585
Attorneys for Applicant